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Social Media as a Tool for Cognitive Development for Children with Developmental Disabilities: Caregivers' Perspectives

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Abstract: Social media has increasingly become an integral part of children's daily lives, including those with developmental disabilities. While concerns about screen time and online risks persist, emerging scholarship suggests that social media when carefully guided may support cognitive development, communication, and learning.

This study examines caregivers' perspectives on the use of social media as a tool for cognitive development among children with developmental disabilities in the United States. Employing a qualitative phenomenological research design, in-depth interviews were conducted with twenty-one caregivers who provide consistent care and support for children diagnosed with conditions such as autism spectrum disorder, ADHD, Down syndrome, and other developmental challenges. The study explores how caregivers perceive social media's influence on children's learning, how they manage and guide usage, and the challenges they encounter in regulating online engagement.

Thematic analysis revealed that caregivers largely view social media as beneficial for enhancing communication, attention, imitation, and learning through visually stimulating and repetitive content such as educational videos, music, and nursery rhymes. However, findings also highlight concerns regarding content safety, excessive screen time, emotional regulation, and the demands of constant supervision.

The study concludes that social media can serve as a supportive cognitive tool for children with developmental disabilities when used purposefully, under close caregiver guidance, and within structured limits. Recommendations emphasize the need for child-specific platforms, improved parental control tools, and caregiver training to maximize benefits while minimizing risks.

Keywords: *Social Media, Cognitive Development, Developmental Disabilities and Caregiver.*

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I. INTRODUCTION

The rapid expansion of digital media technologies has significantly transformed how children learn, communicate, and interact with their social environment. Social media platforms, which were initially developed for adult communication and networking, have increasingly become integrated into children's everyday lives, including those with developmental disabilities. From a mass communication perspective, social media functions as a powerful medium through which messages, symbols, visuals, and narratives are transmitted, interpreted, and internalized, thereby influencing cognitive, social, and behavioural development (Omenugha, Uzuegbunam, & Ndolo, 2021).

Children with developmental disabilities such as autism spectrum disorder (ASD), attention deficit hyperactivity disorder (ADHD), Down syndrome, and other learning or communication disorders often face challenges related to attention span, language development, social interaction, and information processing. These challenges necessitate innovative approaches to learning and cognitive stimulation beyond conventional classroom or therapeutic settings. Recent studies suggest that visually rich, repetitive, and interactive media content may enhance engagement and learning outcomes for children with special needs when appropriately guided (American Academy of Pediatrics [AAP], 2023).

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Social media platforms such as YouTube, child-friendly applications, and educational video platforms have increasingly been adopted by caregivers as supplementary tools for learning, therapy, and engagement. These platforms provide access to multimedia content that combines audio, visuals, music, and animation elements known to support memory retention, imitation, and attention among children with cognitive and developmental challenges. In this sense, social media operates not merely as entertainment but as a mediated learning environment where communication processes influence cognitive development.

Within the mass communication framework, media effects are not uniform; rather, they depend on audience characteristics, context of use, and mediation. For children with developmental disabilities, caregivers play a central role as mediators who regulate exposure, interpret content, and guide meaning-making processes. Caregivers function as gatekeepers in the communication process, determining what content children consume, how long they engage with it, and how it aligns with therapeutic or educational goals. Their perspectives are therefore critical in understanding the impact of social media on children's cognitive development.

Despite the growing reliance on social media as a cognitive and educational tool, scholarly debates persist regarding its benefits and risks. While some researchers emphasize the positive role of digital media in enhancing communication skills, attention, and learning, others caution against excessive screen time, exposure to inappropriate content, online safety risks, and emotional dependency, especially for vulnerable populations (AAP, 2023). These concerns are heightened for children with developmental disabilities, who may struggle to differentiate safe from unsafe content or correctly interpret mediated messages.

This study adopts a phenomenological approach to explore caregivers' lived experiences and perceptions regarding the use of social media for the cognitive development of children with developmental disabilities. Phenomenological research is particularly suitable for understanding human experiences and subjective interpretations, as it allows participants to describe their realities in depth (Creswell, 2012). By focusing on caregivers in the United States, the study aligns with broader national priorities that emphasize inclusive education, digital accessibility, and support for neurodivergent children through policies such as the Individuals with Disabilities Education Act (IDEA) and public health initiatives promoted by institutions like the American Academy of Pediatrics.

By examining caregivers' perspectives, management strategies, and challenges, this research contributes to mass communication scholarship by extending media effects discourse to neurodivergent audiences. It highlights how social media, as a communication medium, can support cognitive development when carefully mediated, while also underscoring the need for responsible media design, caregiver education, and child-specific digital environments.

II. SOCIAL MEDIA AS A TOOL FOR COGNITIVE DEVELOPMENT FOR CHILDREN WITH DEVELOPMENTAL DISABILITIES: CAREGIVERS' PERSPECTIVES

A. Demographic Variables of Caregiver

The caregivers in this study represent a diverse group primarily involved in direct care roles, with a majority being female and aged between 31-50 years. Educational levels are generally high, with most holding bachelor's or master's degrees, and occupations centered around healthcare, support, and professional roles. A slight majority have received training on managing children's digital use.

Table 1 Summarized Table of Key Demographic Variables of Caregiver

Variable	Summary
Caregiver Role / Relationship to Child	Predominantly direct support professionals (DSPs), mothers, nurses, guardians, and caregivers (e.g., 5 DSPs, 3 mothers, 3 nurses). Some responses are incomplete or non-specific (e.g., "Yes", names like "Bola Olaleye").
Age of Caregiver	Mostly 31-50 years (17 out of 21); 1 in 21-30, 1 at 55.
Gender	Overwhelmingly female (18 out of 21); 3 males.
Educational Level	High education: 9 bachelor's or equivalent (BSc, BNS, Bachelor), 8 master's (Masters, Master, MBA), 1 diploma, 1 college degree; 2 blank.
Occupation and Employment Status	Healthcare and support-focused: Nurses (3), DSPs (3), caregivers (3), employed professionals (e.g., Cloud Engineer, Health Consultant); most employed full-time or self-employed; some incomplete.
Training on Managing Child's Digital Use	Yes (10 out of 21); No (11 out of 21).

B. Demographic Variables of the Children

The children are primarily school-aged (4-16 years), with a mix of genders and developmental disabilities such as autism, ADHD, and Down syndrome. Severity is mostly moderate, with enrollment split between special and mainstream education. Internet access is often home-based or child-friendly, with YouTube and educational apps as top platforms. Devices are mainly tablets and smartphones, used for educational, recreational, therapeutic, or social purposes, typically 1-3 hours daily.

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Table 2. Demographic Variables of the Children

Variable	Summary
Age of Child	Range 1-16 years (average ~10); some blank (e.g., Respondents 3, 18).
Gender of Child	Balanced: 10 males, 9 females; 1 prefer not to say; some blank.
Type of Developmental Disability	Autism/ASD (7), ADHD (7), Down Syndrome (2), Intellectual Disability (1), Learning Disabilities (1), Communication Disorder (1).
Severity of Disability	Moderate (12), Mild (5), Severe (2).
Education Enrollment	Special Education (9), Mainstream (7); some blank.
Internet Access	Home internet (12), Child-friendly (5), YouTube-specific (1).
Most Frequent Platforms	YouTube (11), Educational apps (10), TikTok (3), Instagram (1), Facebook (1).
Devices Used	Tablet (13), Smartphone (7), Computer (4), Shared/mixed (e.g., Home TV).
Main Purpose	Educational (8), Therapeutic (6), Recreational (5), Social interaction (2).
Daily Usage	1-3 hours (14), 4+ hours (4), <1 hour (2), 30-40 mins (1).

➢ *Theme 1 Caregivers' Perspectives on Social Media and Children's Cognitive Development*

Thematic analysis of caregivers' perspectives reveals an overall positive to moderate view of social media's role in cognitive development, emphasizing its potential for enhancing communication, attention, and learning through engaging content like educational videos and music. However, experiences vary, with some noting limited engagement due to the child's disability severity. Sub-themes emerge around interaction quality, platform preferences, cognitive influences, memorable learning moments, and stimulating activities, with interpretations linking responses to highlight common patterns and contrasts.

- *Sub-Theme 1: Description of Child's Interaction with Social Media*

Caregivers predominantly describe interactions as positive or moderate, suggesting social media serves as an accessible tool for engagement despite developmental challenges, though a minority report low or absent interaction, indicating barriers related to disability severity or age. For instance, several highlight enthusiasm and calmness, as Respondent 10 noted the child being "very calm and engaged," which aligns with Respondent 15's view of it as "Great," and Respondent 20's "Excellent." This positive trend is echoed in Respondent 16's "Active" and Respondent 17's "Brilliant," yet contrasts with lower engagement cases, such as Respondent 2's "Little" and Respondent 3's "Low," transitioning to Respondent 8's "No interaction," which may reflect younger ages or milder needs. Meanwhile, moderate descriptions bridge these, like Respondent 6 and Respondent 14's "Moderate," and Respondent 19's "Not bad," underscoring variability but overall utility.

- *Sub-Theme 2: Preferred Social Media Platforms and Attractions*

YouTube emerges as the dominant platform, drawn by educational and entertaining content like cartoons and music, reflecting caregivers' perception of it as a safe, visual medium for cognitive stimulation, while educational apps and TikTok appeal for interactive, fun elements. Respondent 1 emphasized "YouTube. Educational cartoons," similarly linked to Respondent 4's "Youtube," Respondent 10's "Youtube," and Respondent 15's "Youtube," with Respondent 17 adding "YouTube, Facebook, to watch Cartoons." This visual appeal extends to Respondent 12's "YouTube, colourful videos and pictures," and Respondent 11's "You tube/ music," however transitioning to alternatives like Respondent 7's "TikTok because of the funny reels" and Respondent 19's "Tiktok," which highlight humor and dynamism. Educational focus persists, as seen in Respondent 8's "Just YouTube Kids and for educational purposes" and Respondent 9's "Youtube, educational content," contrasting with Respondent 13's "None specifically," yet overall tying into child-friendly draws like Respondent 14's "YouTube kids" and Respondent 21's "Cartoon."

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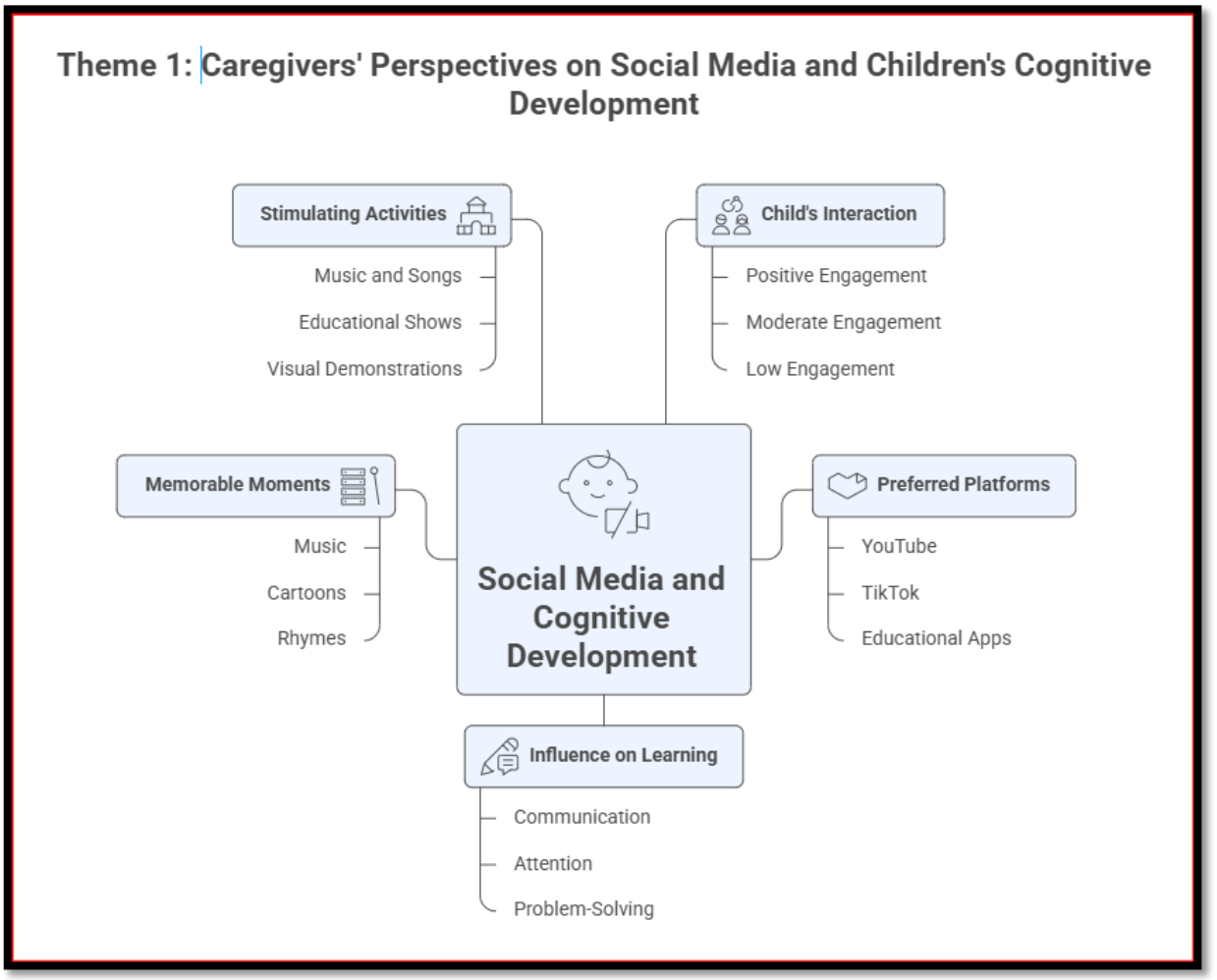

Fig 1. Caregivers' Perspectives on Social Media and Children's Cognitive Development

- *Sub-Theme 3: Influence on Learning or Thinking Abilities*

Social media is seen as enhancing communication and attention most frequently, with some noting improvements in problem-solving and understanding, portraying it as a supportive tool for cognitive gaps in developmental disabilities, though influences are context-dependent. Communication stands out, as Respondent 1 stated "Communication," paralleled by Respondent 2's "Communication," Respondent 10's "Communication," and Respondent 15's "Communication," further connected to Respondent 9's "Increased communication skills" and Respondent 12's "Improved communication." Attention is another key area, with Respondent 3's "Attention," Respondent 5's "Attention," Respondent 6's "Attention," and Respondent 18's "Attention," while Respondent 11 noted "Communication and attention." Positive overall impacts include Respondent 4's "Good," Respondent 21's "Good," and Respondent 17's "It calm her, and improve her communication," yet Respondent 16's "Somewhat" introduces nuance, linking to Respondent 7's "Visual aid, the things he sees, he tries to copy" and Respondent 20's "It has helped improved his understanding," with Respondent 8's "Very effective" and Respondent 19's "Learning" reinforcing broad benefits.

- *Sub-Theme 4: Specific Moments or Activities Aiding Learning and Engagement*

Memorable moments often involve music, rhymes, and cartoons that foster skill acquisition like alphabet learning or recitation, illustrating social media's role in making abstract concepts tangible and engaging for children with disabilities. Respondent 7 highlighted "Alphabet rhymes, he started reciting A-Z just by watching reels and cartoons," similarly connected to Respondent 9's "Watched and learned how to count and read the alphabet" and Respondent 11's "Learning the alphabet songs and maps." Music recurs, as Respondent 5 stated "Music," echoed by Respondent 15's "Music," Respondent 18's "Music," and Respondent 21's "Nursery Rhymes," transitioning to cartoons like Respondent 4's "Cocomelon" and Respondent 14's "When he watches cocomelon." Other examples include Respondent 2's "Reading poem on tv," Respondent 12's "Colouring and music," Respondent 17's "Cooking and listening to music," and Respondent 19's "Watching reel on Tik Tok," with Respondent 16's "Cartoon program" and Respondent 20's "Watching phonics" linking to Respondent 1's "Kpop demon hunters" and Respondent 6's "Kpop demon hunter," though Respondent 3 and Respondent 13 offered no specifics, and Respondent 10's "Kidszbob" adds variety.

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- *Sub-Theme 5: Content and Activities Stimulating Curiosity or Cognitive Growth*

Educational and interactive content like music, songs, and visual demonstrations are deemed most stimulating, emphasizing sensory-rich activities that align with children's needs for repetition and engagement to build curiosity and skills. Music and songs dominate, as Respondent 5 stated "Music," paralleled by Respondent 6's "Song," Respondent 10's "Song and video," and Respondent 11's "Songs and play therapy." Educational elements follow, with Respondent 8's "Educational shows," Respondent 9's "Educational content with pictures and demonstrations," Respondent 13's "Education," and Respondent 20's "Educational related activities." Visual and creative activities link in, such as Respondent 1's "Drawing and painting," Respondent 12's "Art, Music," and Respondent 19's "Moving, laughing sketch," transitioning to Respondent 7's "Cartoons" and Respondent 17's "Gaming and Cooking." Other responses include Respondent 2's "Reading," Respondent 15's "Any automobile content," Respondent 16's "Adventure," and Respondent 21's "Nursery Rhymes," with Respondent 4's "None" and Respondent 18's blank contrasting the majority, while Respondent 14's "Screen time" and Respondent 3's blank highlight occasional gaps.

➢ *Theme 2 How Caregivers Manage and Guide Children's Social Media Use*

Analysis indicates proactive management strategies centered on supervision, limits, and content selection to harness social media for cognitive benefits while mitigating risks, with parental controls and co-viewing as key tools. Sub-themes include guidance methods, rules and limits, suitability decisions, effective safety tools, and integration with learning/therapy goals, revealing a balanced approach informed by child-specific needs.

- *Sub-Theme 1: Support and Guidance During Use*

Caregivers emphasize active involvement like monitoring and co-viewing to ensure positive experiences, reflecting a hands-on approach to guide cognitive development through interaction. Parental guidance is common, as Respondent 1 stated "Parental guidance," echoed by Respondent 5's "Parental guidance," Respondent 10's "Parental guidance," and Respondent 12's "Parental guidance." Co-viewing links closely, with Respondent 4's "Watch with her," Respondent 6's "I watch too," Respondent 9's "I watch too and ask questions about different activities shown," and Respondent 20's "Make sure I watched together with him, to be aware of what is watching." Monitoring extends this, as Respondent 2's "Monitor," Respondent 3's "Watch first before exposing her to it," Respondent 15's "Parental Control," Respondent 16's "Content control," and Respondent 18's "Mentoring," while Respondent 7's "Passwords - he needs me to put in a password to get access to most things online," Respondent 8's "Guidance," Respondent 11's "Access to only age related content," Respondent 17's "I guide her to make sure she watches what will educate her positively," Respondent 19's "About the time, l watch the time she need to be on it," and Respondent 21's "Support" add layers of control and engagement.

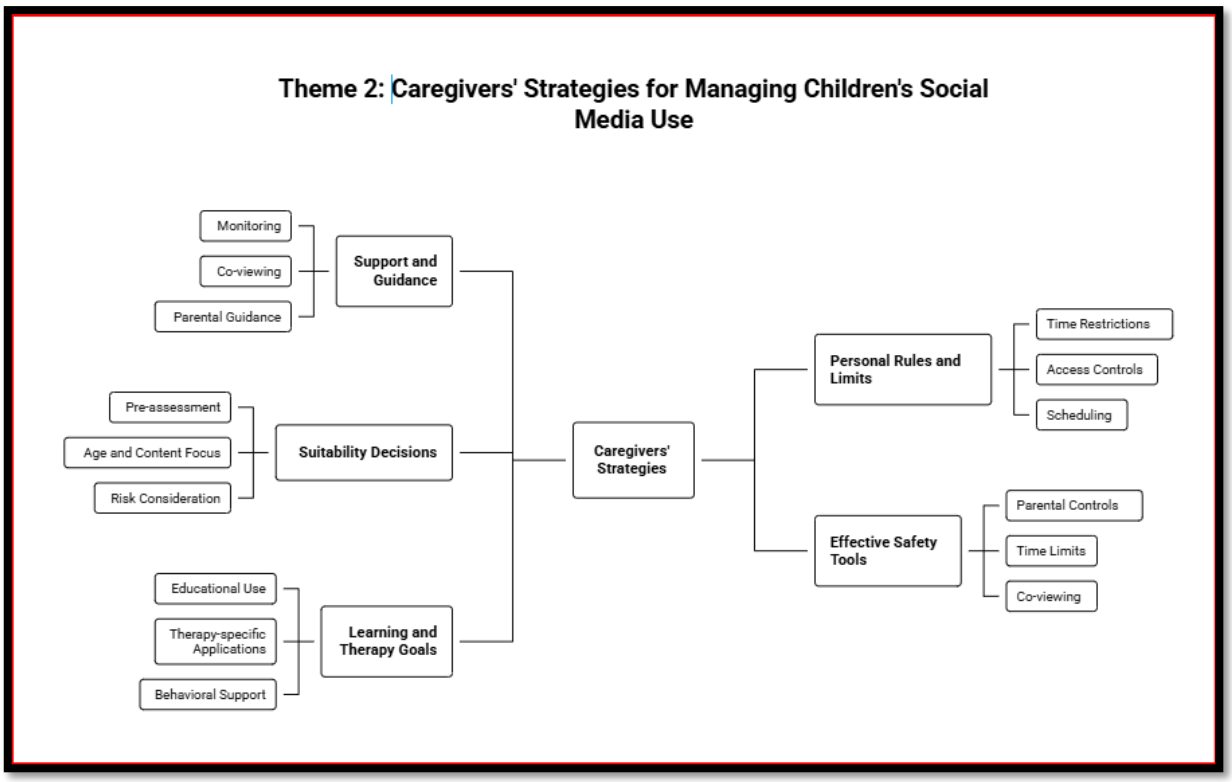

Fig 2. How Caregivers Manage and Guide Children's Social Media Use

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- *Sub-Theme 2: Personal Rules, Routines, or Limits*

Time restrictions and access controls form the core of routines, aimed at preventing overuse and aligning with daily schedules, though variations exist based on child age and needs. Daily limits prevail, as Respondent 1 stated "2 hours daily," similarly Respondent 10's "2 hours per day," Respondent 13's "Two hours usage," and Respondent 7's "1hr max daily for social media," with Respondent 8's "Just 2hrs a day for any online activity" and Respondent 9's "Using the family link app to regulate/restrict online activities." Scheduling ties in, like Respondent 5's "No weekdays," Respondent 21's "Weekends," Respondent 20's "School activities is paramount, internet is basically weekends," and Respondent 6's "Must not go beyond Bed time hour," transitioning to automated tools in Respondent 15's "Tablets locks automatically when it's time to retire for the day" and Respondent 11's "Time limits." Other controls include Respondent 3's "Strict access to some content," Respondent 4's "Unable to download any app," Respondent 14's "Parental lock," Respondent 16's "Limited screen time," Respondent 17's "She should not stay all day on online activities," Respondent 18's "Setting time limit," and Respondent 19's "The time setting," with Respondent 2's "I tell her how many hours she can use" bridging verbal and tech-based limits.

- *Sub-Theme 3: Deciding Suitability of Platforms or Content*

Decisions hinge on personal evaluation, age-appropriateness, and child interests, with pre-viewing and reviews ensuring alignment with cognitive needs and safety. Pre-assessment is key, as Respondent 9 stated "I watch it first," paralleled by Respondent 4's "I personally evaluate for some characteristics such as content purpose and comments," Respondent 20's "By me vetting it first," and Respondent 3's "When my child reflects positive emotional response to things heard or seen." Age and content focus link in Respondent 11's "By personally learning about the gains of these platforms," Respondent 12's "Age appropriate content," Respondent 8's "Through thorough research," and Respondent 16's "Program content and ratings," transitioning to risk consideration in Respondent 10's "I consider interactive risks before exposing my child to any platform" and Respondent 19's "I use to do a decision checklist for the platforms to know if my child can understand the platforms, distinguish safe vs unsafe and whether it allows for parental controls." Child-specific factors include Respondent 2's "She likes to play cartoons where children are playing," Respondent 17's "I studied her area of interest," Respondent 18's "Through reviews," Respondent 5's "I embrace Platforms that gives images and video with parental filters," Respondent 6's "When it is platform of more open social media with safeguards," Respondent 7's "Passwords and my presence," Respondent 14's "Parental lock," Respondent 15's "Parent Controls," Respondent 1's "Strictly content that are educative, those for.learning and reading," Respondent 13's "Directions," and Respondent 21's "Music, Reading stories," with Respondent 26 for Respondent 26 blank.

- *Sub-Theme 4: Effective Methods or Tools for Online Safety*

Parental controls, time limits, and co-viewing are most effective, combining tech and personal oversight to create a secure environment conducive to cognitive growth. Parental controls dominate, as Respondent 4 stated "Using parental control," echoed by Respondent 5's "Parental control," Respondent 6's "Parental control," Respondent 12's "Parental control," Respondent 13's "Parents control," Respondent 16's "Parental control," Respondent 18's "Parental control," and Respondent 21's "Parental Control," with Respondent 9's "I use Parental control family link app" and Respondent 14's "Parental control and Co-viewing" adding specifics. Time limits connect, like Respondent 2's "Setting time limits," Respondent 10's "Time limit," Respondent 11's "Time Limit," and Respondent 15's "Setting time limits and parental control," transitioning to co-viewing in Respondent 1's "Co-viewing," Respondent 3's "Co-viewing," Respondent 7's "Co-viewing and parental control," Respondent 17's "Co- Viewing and setting time limits," Respondent 19's "Setting time and control," and Respondent 20's "Co-viewing." Comprehensive approaches include Respondent 8's "Co-viewing, setting limits and using parental control."

- *Sub-Theme 5: Using Social Media for Learning or Therapy Goals*

Social media is integrated for targeted goals like speech, social skills, and motor imitation, through curated educational content and reinforcement, highlighting its therapeutic potential when guided. Educational use is prominent, as Respondent 9 stated "Using educational content to teach," linked to Respondent 2's "To let her watched educational program," Respondent 11's "Using the educational contents that helps with his learning," Respondent 13's "Education," and Respondent 20's "By introducing what can enhance learning." Therapy-specific applications include Respondent 1's "Speech development," Respondent 10's "For speech therapy," Respondent 3's "Learning social skills and interactive processes," Respondent 6's "In moment to reinforce therapy goals such as waiting, sharing and expression of needs," Respondent 16's "Practicing motor imitation," Respondent 18's "Labeling objects," and Respondent 19's "Learning hygiene routines and safety skills." Behavioral support ties in with Respondent 12's "Encouraging use when agitated," Respondent 15's "For increase motivation and engagement for things and people," and Respondent 5's "Through short DIY and craft, he has been able to know how to attend to steps and solve some problems personally," transitioning to Respondent 7's "Control what he watches and explain things he is curious about," Respondent 8's "Making sure that the activity are age appropriate and developmental appropriate," Respondent 14's "When there is a need to learn how to do things, he watches model for behaviour," Respondent 17's "Learnt from other colleagues shared their experience of similar situation like my child," and Respondent 21's "Music, singing and dancing," with Respondent 4's "None" as an outlier.

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➢ *Theme 3 Challenges Faced by Caregivers in Managing Children's Social Media Use*

Challenges center on content risks, time management, and emotional impacts, with caregivers expressing concerns over safety and addiction, yet noting adaptive strategies; sub-themes cover personal difficulties, safety worries, negative experiences, behavioural changes, management challenges, and needed resources, underscoring the need for better tools.

- *Sub-Theme 1: Personal Difficulties in Positive Use*

Difficulties include time constraints for supervision, content exposure risks, and regulating usage, portraying the balancing act between benefits and oversight demands. Time and attention issues arise, as Respondent 7 stated "Sometimes I don't have the time to co-view and one cannot apply passwords to everything he watches online," similarly Respondent 10's "Not always having the time to assess all content on social media before exposing it to the child," and Respondent 9's "Hesitation from the child when its time out." Content risks link in Respondent 2's "Accidentally coming across inappropriate content," Respondent 3's "Inability of a child to identify or understand manipulative behaviour and stranger," Respondent 5's "Child sharing personal details online without understanding privacy necessity," and Respondent 19's "Not been certain of content that can affect the child in terms of emotionally and socially as it is unpredictable at time," transitioning to regulation challenges like Respondent 1's "Keeping them away from social media to get their attention," Respondent 11's "He sometimes does not want to drop the phone or could want to use it at odd times," Respondent 15's "Difficulty in setting limits," Respondent 16's "Addiction to longer screen time preference," and Respondent 20's "Having choose a program to watch already by a child tends to becomes difficulty to regulate." Other aspects include Respondent 12's "Choosing appropriate content," Respondent 17's "I have to be checking on her from time to time to ensure she follows the routine and she is using the Social media positively," and Respondent 21's "A child misinterpreting social cues such as jokes, tone and sarcasm," with Respondent 4's "None," Respondent 8's "None," Respondent 13's "NA," Respondent 14's "None," and Respondent 18's blank as exceptions.

- *Sub-Theme 2: Worries About Safety, Privacy, or Information Exposure*

A majority express concerns, highlighting pervasive anxiety over online risks tailored to vulnerable children, though some report none, possibly due to strict controls. Affirmative responses dominate, as Respondent 1 stated "Yes," paralleled by Respondent 2's "Yes," Respondent 3's "Yes," Respondent 5's "Yes," Respondent 6's "Yes," Respondent 9's "Yes," Respondent 10's "Yes," Respondent 12's "Yes," Respondent 13's "Yes," Respondent 14's "Yes," Respondent 15's "Yes," Respondent 16's "Yes," Respondent 17's "Yes," and Respondent 20's "Yes." Contrasts appear in Respondent 4's "No," Respondent 7's "No," Respondent 8's "No," Respondent 11's "No," Respondent 18's "No," Respondent 19's "No," and Respondent 21's "No," suggesting effective mitigation in some cases.

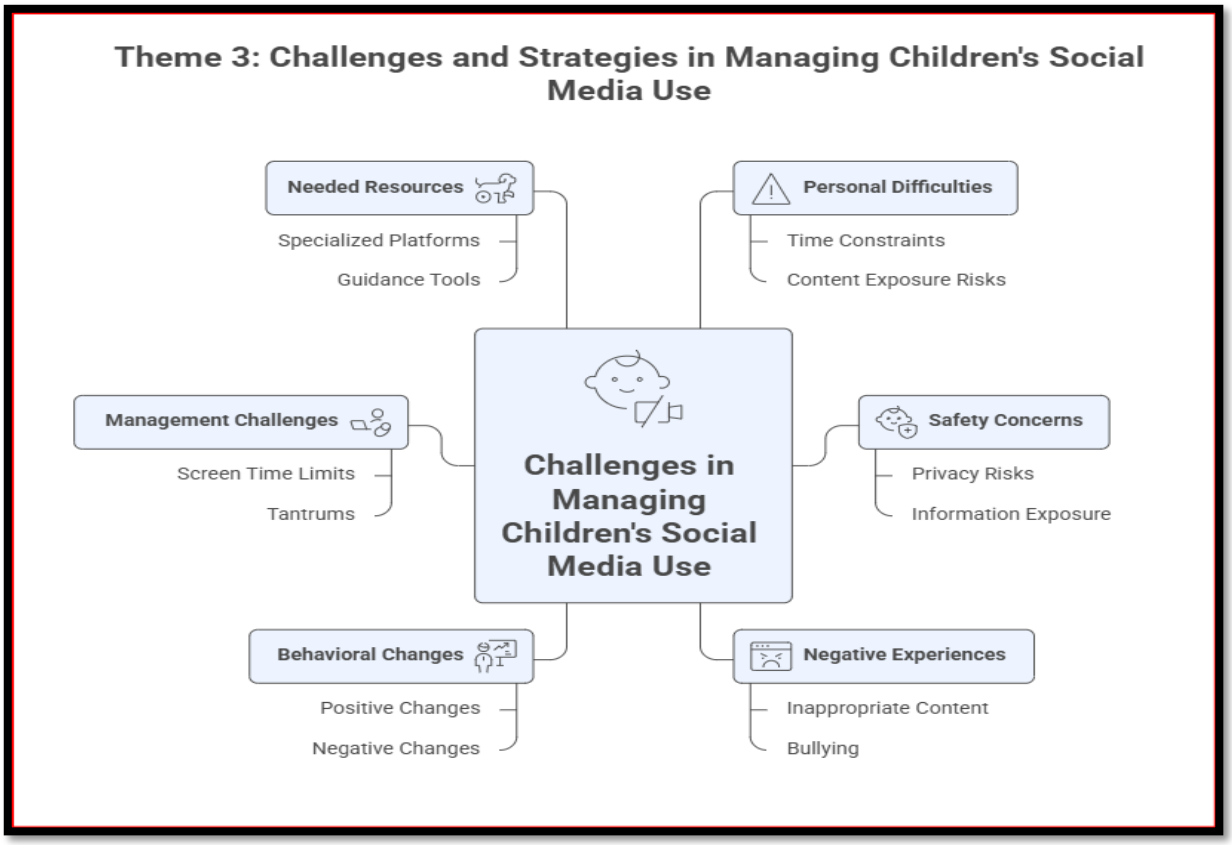

Fig 3. Challenges Faced by Caregivers in Managing Children's Social Media Use

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- *Sub-Theme 3: Negative Experiences and Handling Strategies*

Negative experiences involve inappropriate content, aggression, or bullying, handled through device removal, redirection, or content curation, showing reactive yet practical responses. Content exposure features, as Respondent 3 stated "When he got exposed to content revealing violence. I had to make a safe content list," linked to Respondent 12's "Confronting and scaring content. Redirecting the child to other activities they like," and Respondent 16's "Unsolicited pop up advertisements." Behavioral issues include Respondent 1's "Aggression, I had to take the device away from them," Respondent 2's "When she mistakenly put tv on another program that she doesn't understand," and Respondent 18's "Sadness and anxiety set in at some point. I had to teach him how to block someone whose content is mean and uncalled for." Other incidents like Respondent 6's "Bullying" and Respondent 14's "There are predators I just try to check what my child sees," with handling via Respondent 11's "When he stays too long on the phone and I pivot his attention to other things." Many report none, such as Respondent 4's "None," Respondent 8's "None," Respondent 9's "None so far because apps are monitored," Respondent 15's "None," Respondent 17's "She had never encountered any negative experiences ever since working with her, because of proper guide and direction given her," Respondent 19's "None," Respondent 20's "N/A," Respondent 21's "None," Respondent 5, Respondent 7's "Nothing serious yet, hopefully, not anytime soon," Respondent 10, and Respondent 13's "NA."

- *Sub-Theme 4: Observed Changes in Behavior or Emotions*

Changes are mostly positive, like improved communication and calmness, but negative aspects like addiction or excitement highlight dual impacts requiring management. Positive shifts prevail, as Respondent 8 stated "Positive," echoed by Respondent 9's "Positive changes.... learned to say some words easily," Respondent 10's "He communicates better," Respondent 12's "calming effect, emotional regulation," Respondent 15's "Positive - He can identify cars he likes," Respondent 16's "Critical thinking stills acquisition," Respondent 17's "Positive change in her behavior noticed, she always want to demonstrate what she learned about cooking on social media," Respondent 18's "Very positive, there is a better communication and reasoning improvement," and Respondent 21's "Positive. Settled." Mixed or dual effects include Respondent 7's "Positive- he is able to recite nursery rhymes faster. Negative - he could easily get addicted to the tablet if serious control is not put in place" and Respondent 11's "Sometimes he is happy but he may also get too excited." Affirmative yeses without detail from Respondent 1 "Yes," Respondent 2 "Yes," Respondent 3 "Yes," Respondent 5 "Yes, catching up better," Respondent 6 "Yes, Interaction has improved," Respondent 20 "Yes," with neutrals like Respondent 4's "None," Respondent 14's "No," Respondent 19's "None," and Respondent 13's "NA."

- *Sub-theme 5: Emotional or Practical Challenges in Management*

Challenges involve limiting screen time, handling tantrums, and content filtering, reflecting emotional strain and practical hurdles in balancing benefits with risks. Screen time limits are central, as Respondent 3 stated "Limiting screen time," paralleled by Respondent 6's "Limiting screen time," and Respondent 14's "Limiting screen time." Tantrums link in Respondent 7's "Sometimes he throws tantrums when internet time is up and tablet is collected," Respondent 15's "Tantrums," and Respondent 18's "Tantrum when not interested in a content to time." Content issues include Respondent 5's "Content regulation," Respondent 12's "Unable to completely filter age appropriate content," and Respondent 9's "Being present all the time when online as there is no time to do other things," transitioning to emotional aspects like Respondent 10's "Emotional imbalance with content embrace" and Respondent 11's "because of his learning peculiarities, some contents make him upset...especially if it does not come sequentially as expected and I calm him down." Other challenges encompass Respondent 1's "Convincing them to watch more of educative programs," Respondent 2's "At times she wouldn't like to off the TV," Respondent 20's "Improvement in perception," and Respondent 21's "Vocalizing," with none from Respondent 4 "None," Respondent 8 "None," Respondent 13 "NA," Respondent 16 "None," Respondent 17 "None," and Respondent 19 "None."

- *Sub-Theme 6: Needed Help, Guidance, or Resources for Caregivers*

Resources desired include specialized platforms, content filtering, and guidance like co-watching, to enhance safety and effectiveness for developmental needs. Specialized content is key, as Respondent 6 stated "Social media Platform for children should be made separate," echoed by Respondent 7's "Social media originators should have a whole new platform strictly for kids alone," Respondent 14's "There should be clear content for children only," and Respondent 15's "More educational contents for children with special needs." Guidance tools include Respondent 1's "Co-watching," Respondent 10's "Co-viewing," Respondent 18's "Helpful content for children and co-watching for guidance," and Respondent 4's "Guidance," transitioning to filtering in Respondent 3's "Content regulation," Respondent 5's "Content filtering," Respondent 16's "Content screening," and Respondent 8's "Reporting of any inappropriate information that might be included in any educational activities for kids." Involvement and education feature in Respondent 11's "Be a lot involved in the exact thing they aim to achieve from social media," Respondent 20's "To be involved in it," Respondent 12's "Choosing helpful resources/ content," Respondent 9's "Age and condition appropriate youtube categories and Educational curriculum for special needs children so the can learn in other ways," Respondent 2's "I will monitor her so that can watched, cartoon, educational programs so that she knows how to communicate and write," and Respondent 17's "I have to pay more attention to understand areas where she needs to be guided," with Respondent 19's "I don't have any help just watching her and praying" and Respondent 13's "NA" as outliers.

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III. CONCLUSION

This study examined social media as a tool for cognitive development among children with developmental disabilities from the perspectives of caregivers who provide daily support and guidance. Findings reveal that social media, when appropriately managed, can serve as a valuable supplementary resource for enhancing communication, attention, learning, and emotional regulation in children with developmental challenges. Caregivers largely perceive platforms such as YouTube and educational applications as effective due to their visual, auditory, and repetitive content, which aligns with the learning needs of many children with disabilities.

However, the study also underscores significant challenges associated with social media use, including concerns about inappropriate content, excessive screen time, emotional dependency, and the practical demands placed on caregivers for constant supervision. These challenges highlight the dual nature of social media as both a beneficial cognitive tool and a potential source of risk. The findings emphasize that positive outcomes are largely dependent on active caregiver mediation, including co-viewing, content vetting, time regulation, and alignment with therapeutic or educational goals.

Children with developmental disabilities do not engage with media in isolation; rather, their experiences are shaped by caregivers who function as critical intermediaries in the communication process. The research therefore calls for greater collaboration between media producers, educators, policymakers, and caregivers to design child-specific platforms, improve parental control technologies, and provide training that empowers caregivers to maximize the developmental benefits of social media.

In conclusion, social media holds significant potential as a cognitive development tool for children with developmental disabilities, but its effectiveness depends on intentional use, structured guidance, and supportive digital environments. By centering caregivers' voices, this study contributes meaningfully to media and communication scholarship, offering insights that can inform inclusive media practices and responsible digital engagement for neurodivergent children.

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